

U.S.S.N. 09/101,413

Filed: August 7, 1998

AMENDMENT AND RESPONSE TO OFFICE ACTION

It is believed that no fee is required with this submission. However, should a fee be required, the Commissioner is hereby authorized to charge the fee to Deposit Account No. 50-1868.

In the Claims

1. (Four times amended) A method of killing cells in a patient with a disease selected from the group consisting of a cancer, a disease caused by a pathogen, a disease associated with abnormal glycosylation of polypeptides, and a disease associated with abnormally elevated amounts of a hormone; wherein the disease is characterized by expression [by the patient of an abnormal antigen or] of an abnormally elevated amount of a [antigen] polypeptide as compared to the non-diseased state, or by expression of an infectious agent protein, the method comprising

administering to the patient a therapeutically effective amount of cytotoxic T lymphocytes (CTL),

wherein the CTLs have a different HLA class I complex (or equivalent) than the cells to be killed, and

the CTLs specifically recognize a peptide portion of the [abnormal antigen or antigen] polypeptide which is abnormally elevated in patients with the disease or the infectious agent protein, when the peptide is presented by the HLA class I complex (or equivalent) on the surface of cells to be killed, wherein the HLA class I complex (or equivalent) type presenting the peptide in the cells to be killed is not present in the CTLs to be administered to the patient, and

the CTLs kill the presenting cells.

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Please cancel claim 4.

5. (Twice amended) A method according to Claim [4] 1 wherein the polypeptide is a mutant polypeptide associated with the diseased cells.

6. (Twice amended) A method according to Claim [4] 1 wherein the polypeptide is present at an abnormally elevated amount in the diseased cells compared to non-diseased cells.

27. (Three times amended) A method according to Claim 1 wherein the [molecule] polypeptide is selected from the group consisting of cyclin D1, cyclin E, mdm 2, EGF-R, erb-B2, erb-B3, FGF-R, insulin-like growth factor receptor, Met, myc, and p53[, BCL-2, mutant p53, a polypeptide associated with the BCR/ABL translocation in CML and ALL, mutant CSF-1 receptor, mutant APC, mutant RET, mutant EGFR, a polypeptide associated with PML/RARA translocation in PML, a polypeptide associated with E2A-PBX1 translocation in pre B leukaemias and in childhood acute leukaemias, human papilloma virus proteins, Epstein-Barr virus proteins, HTLV-1 proteins, hepatitis B virus proteins, hepatitis C virus proteins, herpes-like virus proteins and HIV encoded proteins].

Remarks

Claims 1-3, 5-18, and 25-29 are pending. Claims 1, 5, 6, and 27 have been amended. Claim 4 has been canceled. Claims 9-13 and 27 were withdrawn from consideration by the Examiner. Claim 1 has been amended to define and characterize the disease and wherein the disease is characterized by expression of an abnormally elevated amount of a polypeptide as compared to the non-diseased state. Support for the amendments to claim 1 can be found, for example, at page 9, lines 5-9 (disease caused by a pathogen); page 9, lines 19-28 (disease caused